



031204

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

*(Only for new nonprovisional applications under 37 CFR 1.53(b))*

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 14]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications (*if applicable*)
  - Statement Regarding Fed sponsored R & D (*if applicable*)
  - Reference to sequence listing, a table, or a computer program listing appendix (*if applicable*)
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [ Total Sheets 3]
5. Oath or Declaration [ Total Pages 2]
  - a.  Newly executed (original or copy)
  - b.  Unsigned
  - c.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6.  Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation     Divisional     Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information:

Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label						or <input checked="" type="checkbox"/> Correspondence address below
Name	Candice J. Clement					
Address	Nixon Peabody LLP					
City	Rochester	State	NY	Zip Code	14603-1051	
Country	USA	Telephone	(585) 263-1601 1069	Fax	(585) 263-1600	
Name (Print/Type)	Candice J. Clement	Registration No. (Attorney/Agent)			39,946	
Signature	<i>Candice J. Clement</i>			Date	March 12, 2004	

# FEE TRANSMITTAL FOR FY 2004

*Patent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 770)

<i>Complete if Known</i>	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Ganley
Examiner Name	To Be Assigned
Art Unit	To Be Assigned
Attorney Docket No.	20959/2280

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account:

Deposit Account Number

14-1138

Deposit Account Name

Nixon Peabody LLP

## The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001	770	2001 Utility filing fee	770
1002	340	2002 Design filing fee	
1003	530	2003 Plant filing fee	
1004	770	2004 Reissue filing fee	
1005	160	2005 Provisional filing fee	
<b>SUBTOTAL (1)</b>			(\$ 770)

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	16	-20** =	0 X 18 =	0
Independent Claims	3	-3*** =	0 X 86 =	0
Multiple Dependent			X =	0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	86	2201 43 Independent claims in excess of 3
1203	290	2203 145 Multiple dependent claim, if not paid
1204	86	2204 43 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		(\$ 0)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65 Surcharge – late filing fee or oath
1052	50	2052	25 Surcharge – late provisional filing fee or cover sheet
1053	130	1053	130 Non-English specification
1812	2,520	1812	2,520 For filing a request for <i>ex parte</i> reexamination
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action
1251	110	2251	55 Extension for reply within first month
1252	420	2252	210 Extension for reply within second month
1253	950	2253	475 Extension for reply within third month
1254	1,480	2254	740 Extension for reply within fourth month
1255	2,010	2255	1,005 Extension for reply within fifth month
1401	330	2401	165 Notice of Appeal
1402	330	2402	165 Filing a brief in support of an appeal
1403	290	2403	145 Request for oral hearing
1451	1,510	1451	1,510 Petition to institute a public use proceeding
1452	110	2452	55 Petition to revive – unavoidable
1453	1,330	2453	665 Petition to revive – unintentional
1501	1,330	2501	665 Utility issue fee (or reissue)
1502	480	2502	240 Design issue fee
1503	640	2503	320 Plant issue fee
1460	130	1460	130 Petitions to the Commissioner
1807	50	1807	50 Processing fee under 37 CFR 1.17(q)
1806	180	1806	180 Submission of Information Disclosure Stmt
8021	40	8021	40 Recording each patent assignment per property (times number of properties)
1809	770	2809	385 Filing submission after final rejection (37 CFR 1.129(a))
1810	770	2810	385 For each additional invention to be examined (37 CFR 1.129(b))
1801	770	2801	385 Request for Continued Examination (RCE)
1802	900	1802	900 Request for expedited examination of a design application
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0)

## CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

- deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop \_\_\_\_\_, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450
- transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) \_\_\_\_\_.

Date \_\_\_\_\_

Signature \_\_\_\_\_

Typed or printed name \_\_\_\_\_

## SUBMITTED BY

Complete (*if applicable*)

Name ( <i>Print/Type</i> )	Candice J. Clement	Registration No. ( <i>Attorney/Agent</i> )	39,946	Telephone	(585) 263-1069
Signature	<i>Candice J. Clement</i>			Date	March 12, 2004

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **20959/2280**

APPLICANTS: **Robert Ganley**

TITLE: **ABUTMENT FOR TOOTH IMPLANT**

Certificate is attached to the **Utility Patent Application Transmittal Letter** (1 page) (in duplicate) and **Fee Transmittal** (1 page) (in duplicate) of the above-named application.

EXPRESS MAIL NUMBER: **EL 984956937 US**

DATE OF DEPOSIT: **March 12, 2004**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Shawn A. Lockett

(Typed or printed name of person mailing  
paper or fee)

  
(Signature of person mailing paper or fee)

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **20959/2280**

APPLICANTS: **Robert Ganley**

TITLE: **ABUTMENT FOR TOOTH IMPLANT**

Certificate is attached to the **Drawings (3 sheets)** of the above-named application.

EXPRESS MAIL NUMBER: **EL 984956937 US**

DATE OF DEPOSIT: **March 12, 2004**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Shawn A. Lockett

(Typed or printed name of person mailing  
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**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **20959/2280**

APPLICANTS: **Robert Ganley**

TITLE: **ABUTMENT FOR TOOTH IMPLANT**

Certificate is attached to the Patent Application including specification, claims and abstract (14 pages) and UNSIGNED Combined Declaration and Power of Attorney (2 pages) of the above-named application.

EXPRESS MAIL NUMBER: **EL 984956937 US**

DATE OF DEPOSIT: **March 12, 2004**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Shawn A. Lockett

(Typed or printed name of person mailing  
paper or fee)



(Signature of person mailing paper or fee)